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**City of Albuquerque**



## **AUTOMATIC PAYMENT AUTHORIZATION AGREEMENT**

I hereby authorize the City of Albuquerque to coordinate payment transaction with the financial institution listed on the form each month for payment of my Water/Sewer/Refuse bill. I understand that if at any time I decide to discontinue this payment service, I will notify the City of Albuquerque.

<b>New Agreement</b>		<b>Change financial institution only</b>	
<i>Signature:</i>		<i>Date:</i>	
<i>Name:</i>		<i>Water Account Number:</i>	
<i>Daytime Phone:</i>			
<i>Service Address:</i>			
<i>Mailing Address:</i>			
<i>City:</i>	<i>State:</i>	<i>Zip:</i>	
<b>Financial Institution Information</b>			
<b><i>IMPORTANT:</i></b> A voided check is required to validate account information.			
<i>Name of Financial Institution:</i>			
<i>Account Number:</i>			
<i>Indicate Type of Account:</i>	<input type="checkbox"/> <i>Checking</i>	<input type="checkbox"/> <i>Savings</i>	
Mail this form to the following address ( <i>with your voided check or deposit slip</i> ): <b>City of Albuquerque</b> <b>Customer Services Division</b> P.O. Box 1293 Albuquerque, NM 87103			

***Do NOT Enclose with Your Water Payment***